Procedure Code	Procedure Code Description	Rate
	ELCTRODE, NEEDLE, ABLATION, MR COMPATIBLE	
C1031	LEVEEN, MODIFIED LEVEEN NEEDLE ELECTRODE	\$0.00
	LASER OPTIC TREATMENT SYSTEM, INDIGO LASEROPTIC	•
C1088	TREATMENT SYSTEM	\$0.00
	ENDOTRACHEAL TUBE, VETT TRACHEOBRONCHIAL	· · · · · · · · · · · · · · · · · · ·
C1146	TUBE	\$0.00
C1170	BIOPSY DEVICE, BREAST, ABBI DEVICE	\$0.00
C1175	BIOPSY DEVICE, MIBB DEVICE	\$0.00
	BIOPSY DEVICE, MAMMOTOME HH HAND-HELD PROBE	·
C1176	WITH SMARTVAC VACUUM SYSTEM	\$0.00
	BIOPSY DEVICE, 11-GAUGE MAMMOTOME PROBE WITH	·
C1177	VACUUM CANNISTER	\$0.00
	BIOPSY DEVICE,14-GAUGE MAMMOTOME PROBE WITH	·
C1179	VACUUM CANNISTER	\$0.00
	HYPERBARIC OXYGEN UNDER PRESSURE, FULL BODY	
C1300	CHAMBER, PER 30 MINUTE INTERVAL	\$0.00
	ELECTRODE, DISPOSABLE, PALATE SOMNOPLASTY	
	COAGULATING ELECTRODE, BASE OF TONGUE	
C1321	SOMNOPLASTY COAGULATING ELECTR	\$0.00
	ELECTRODE, DISPOSABLE, PALATE SOMNOPLASTY	
C1322	COAGULATING ELECTRODE	\$0.00
	ELECTRODE, DISPOSABLE, VAPR ELECTRODE, VAPR T	
C1323	THERMAL ELECTRODE	\$0.00
	ELECTRODE, DISPOSABLE, LIGASURE DISPOSABLE	
C1324	ELECTRODE	\$0.00
	ELECTRODE, DISPOSABLE, GYNECARE VERSAPOINT	
C1329	RESECTOSCOPIC SYSTEM BIPOLAR ELECTRODE	\$0.00
	INFUSION SYSTEM, ON-Q PAIN MANAGEMENT SYSTEM,	
	ON-Q SOAKER PAIN MANAGEMENT SYSTEM, AND	
C1368	PAINBUSTER PAIN MANAGEME	\$0.00
	ANCHOR/SCREW FOR OPPOSING BONE-TO-BONE OR	
C1713	SOFT TISSUE- TO-BONE (IMPLANTABLE)	\$0.00
	CATHETER, TRANSLUMINAL ATHERECTOMY,	
C1714	DIRECTIONAL	\$0.00
C1715	BRACHYTHERAPY NEEDLE	\$0.00
C1716	BRACHYTHERAPY SEED,GOLD 198	\$0.00
	BRACHYTHERAPY SEED,HIGH DOSE RATE IRIDIUM 192,	
C1717	PER DOSE	\$0.00
0.4710	BRACHYTHERAPY SEED, NON-HIGH DOSE RATE IRIDIUM	**
C1719	192	\$0.00
C1721	CARDIOVERTER DEFIBRILLATOR, DUAL CHAMBER	\$0.00
04700	CARDIOVERTER-DEFIBRILLATOR, SINGLE CHAMBER	# 2.22
C1722	(IMPLANTABLE)	\$0.00
01704	CATHETER, TRANSLUMINAL ATHERECTOMY,	Φ0.00
C1724	ROTATIONAL	\$0.00
	CATHETER, TRANSLUMINAL ANGIOPLASTY, NON-LASER	
01705	(MAY INCLUDE GUIDANCE, INFUSION/PERFUSION	#0.00
C1725	CATHETED DALLOON DILATATION NON VASCULAD	\$0.00
C1726	CATHETER, BALLOON DILATATION, NON-VASCULAR	\$0.00
C1707	CATHETER, BALLOON TISSUE DISSECTOR, NON-	ተለ ሰላ
C1727	VASCULAR (INSERTABLE)	\$0.00

Procedure Code	Procedure Code Description	Rate
0.1700	CATHETER BRANCH VILLERARY CEER ARMY WATER TOO	<u></u>
C1728	CATHETER, BRANCHYTHERAPY SEED ADMINISTRATION	\$0.00
C1729	CATHERTER, DRAINAGE	\$0.00
	CATHETER,ELECTROPHYSIOLOGY, DIAGNOSTIC, OTHER	
C1730	THAN 3D MAPPING (19 OR FEWER ELECTRODES)	\$0.00
G1730	THAN 3D MAFFING (19 OR FEWER ELECTRODES)	φυ.υυ
	CATHETER, ELECTROPHYSIOLOGY, DIAGNOSTIC, OTHER	
C1731	THAN 3D MAPPING (20 OR MORE ELECTRODES)	\$0.00
511.51	CATHETER, ELECTROPHYSIOLOGY,	+ + + + + + + + + + + + + + + + + + +
C1732	DIAGNOSTIC/ABLATION, 3D OR VECTGOR MAPPING	\$0.00
	CATHETER,ELECTROPHYSIOLOGY,	·
C1733	DIAGNOSTIC/ABLATION, OTHER THAN 3D OR VECTOR	\$0.00
C1750	CATHETER, HEMODIALYSIS, LONG-TERM	\$0.00
	CATHETER, INFUSION, INSERTED PERIPHERALLY,	
C1751	CENTRALLY OR MIDLINE, (OTHER THAN HEMODIALYSIS)	\$0.00
C1752	CATHETER, HEMODIAYSIS, SHORT-TERM	\$0.00
C1753	CATHETER, INTRAVASCULAR ULTRASOUND	\$0.00
C1754	CATHETER, INTRADISCAL	\$0.00
C1755	CATHETER, INTRASPINAL CATHETER, PACING, TRANSESOPHAGEAL	\$0.00
C1756 C1757	CATHETER, PACING, TRANSESOPHAGEAL CATHETER, TROMBECTOMY/EMBOLECTOMY	\$0.00
C1757	CATHETER, TROMBECTOMY/EMBOLECTOMY CATHETER, URETERAL	\$0.00 \$0.00
C1759	CATHETER, ORETERAL CATHETER, INTRACARDIAC ECHOCARDIOGRAPHY	\$0.00
G1759	CLOSURE DEVICE, VASCULAR	φυ.υυ
C1760	(INPLANTABLE/INSERTABLE)	\$0.00
	,	'
C1762	CONNECTIVE TISSUE, HUMAN (INCLUDES FASCIA LATA)	\$0.00
	CONNECTIVE TISSUE, NON-HUMAN (INCLUDES	
C1763	SYNTHETIC)	\$0.00
C1764	EVENT RECORDER, CARDIAC (IMPLANTABLE)	\$0.00
C1765	ADHESION BARRIER	\$0.00
	INTRODUCER/SHEATH, GUIDING, INTRACARDIAC	
	ELECTROPHYSIOLOGICAL, STEERABLE, OTHER THAN	• -
C1766	PEEL AWAY	\$0.00
C1767	GENERATOR, NEUROSTIMULATOR (IMPLANTABLE)	\$0.00
C1768	GRAFT, VASCULAR	\$0.00
C1769	GUIDE WIRE	\$0.00
C1770	IMAGING COIL, MAGNETIC RESONANCE (INSERTABLE) REPAIR DEVICE, URINARY, INCONTINENCE, WITH SLING	\$0.00
C1771	GRAFT	\$0.00
C1771	INFUSION PUMP, PROGRAMMABLE (IMPLANTABLE)	\$0.00
01772	RETRIEVAL DEVICE, INSERTABLE (USED TO RETRIEVE	φυ.υυ
C1773	FRACTURED MEDICAL DEVICES)	\$0.00
C1776	JOINT DEVICE (IMPLANTABLE)	\$0.00
5.,,5	LEAD, CARDIOVERTER-DEFIBRILLATOR, ENDOCARDIAL	Ψ0.00
C1777	SINGLE COIL (IMPLANTABLE)	\$0.00
C1778	LEAD, NEUROSTIMULATOR (IMPLATABLE)	\$0.00
C1779	LEAD, PACEMAKER,TRANSVENOUS VDD SINGLE PASS	\$0.00

Procedure Code	Procedure Code Description	Rate
C1780	LENS, INTRAOCULAR (NEW TECHNOLOGY)	\$0.00
C1781	MESH (IMPLANTABLE)	\$0.00
C1782	MORCELLATOR	\$0.00
C1783	OCULAR IMPLANT, AQUEOUS DRAINAGE ASSIST DEVICE	\$0.00
C1784	OCULAR DEVICE, INTRAOPERATIVE, DETACHED RETINA	\$0.00
	PACEMAKER, DUAL CHAMBER, RATE-RESPONSIVE	
C1785	(IMPLANTABLE)	\$0.00
0	PACEMAKER, SINGLE CHAMBER, RATE-RESPONSIVE	
C1786	(IMPLANTABLE)	\$0.00
C1787	PATIENT PROGRAMMER, NEUROSTIMULATOR	\$0.00
C1788	PORT, INDWELLING (IMPLANTABLE)	\$0.00
C1789	PROSTHESIS,BREAST (IMPLANTABLE)	\$0.00
C1813	PROSTHESIS, PENILE, INFLATABLE	\$0.00
C1815	PROSTESIS, UNRINARY SPHINCTER (IMPLANTABLE)	\$0.00
04040	RECEIVER AND/OR TRANSMITTER, NEUROSTIMULATOR	# 0.00
C1816	(IMPLANTABLE)	\$0.00
C1817	SEPTAL DEFECT IMPLANT SYSTEM, INTRACARDIAC	\$0.00
01010	SURGICAL TISSUE LOCALIZATION AND EXCISION DEVICE	Φ0.00
C1819	(IMPLANTABLE)	\$0.00
	CENERATOR NEOROSTIMULATOR (IMPLANTARIE) MITUL	
C1820	GENERATOR, NEOROSTIMULATOR (IMPLANTABLE), WITH RECHARGEABLE BATTERY AND CHARGING SYSTEM	#0.00
C1820	INTERSPINIOUS PROCESS DISTRACTION DEVICE	\$0.00
C1821	(IMPLANTABLE)	\$0.00
C1874	STENT,COATED/COVERED, WITH DELIVERY SYSTEM	\$0.00
01074	OTENT, OOKTEB/OOVEREB, WITH BELIVEITH OTOTEM	ψ0.00
C1875	STENT, COATED/COVERED, WITHOUT DELIVERY SYSTEM	\$0.00
	STENT, NON-COATED/NON-COVERED, WITH DELIVERY	,
C1876	SYSTEM	\$0.00
	STENT, NON-COATED/NON-COVERED, WITHOUT	
C1877	DELIVERY SYSTEM	\$0.00
	MATERIAL FOR VOCAL CORD MEDIALIZATION,	
C1878	SYNTHETIC(IMPLANTABLE)	\$0.00
C1880	VENA CAVA FILTER	\$0.00
C1881	DIALYSIS ACCESS SYSTEM(IMPLANTABLE)	\$0.00
	CARDIOVERTER-DEFIBRILLATOR, OTHER THAN SINGLE	
C1882	OR DUAL CHAMBER (IMPLANTABLE)	\$0.00
	ADAPTOR/EXTENSION, PACING LEAD OR	
C1883	NEUROSTIMULATOR LEAD (IMPLANTABLE)	\$0.00
C1885	CATHETER, TRANSLUMINAL ANGIOPLASTY, LASER	\$0.00
0.155	CATHETER, GUIDING (MAY INCLUDE	.
C1887	INFUSION/PERFUSION CAPABILITY)	\$0.00
04000	CATHETER, ABLATION, NON-CARDIAC, ENDOVASCULAR	Φ0.00
C1888	(IMPLANTABLE)	\$0.00
04004	INFUSION PUMP, NON-PROGRAMMABLE, PERMANENT	Φ0.00
C1891	(IMPLANTABLE)	\$0.00
	INTRODUCER/SHEATH, GUIDING, INTRACARDIAC	
01000	ELECTOPHYSIOLOGICAL, FIXED-CURVE, OTHER THAN	фо oo
C1892	PEE-AWAY	\$0.00

Procedure Code	Procedure Code Description	Rate
	INTRODUCER/SHEATH, GUIDING, INTRACARDIAC	
	ELECTROPHYSIOLOGICAL, FIXED CURVE, OTHER THAN	
C1893	PEEL-AWAY	\$0.00
	INTRODUCER/SHEATH, OTHER THAN GUIDING,	
C1894	INTRACARDIA ELECTROPHSIOLOGICAL, NON LASER	\$0.00
	LEAD, CARDIOVERTER-DEFIBRILLATOR, ENDOCARDIAL	
C1895	DUAL COIL (IMPLANTABLE)	\$0.00
	LEAD, CARDIOVERTER-DEFIBRILLATOR, OTHER THAN	
C1896	ENDOCARIAL SINGE OR DUAL COIL	\$0.00
C1897	LEAD, NEUROSTIMULATOR TEST KIT (IMPLANTABLE)	\$0.00
	LEAD, PACEMAKER, OTHER THAN TRANSVENOUS VDD	
C1898	SINGLE PASS	\$0.00
	LEAD, PACEMAKER/CARDIOVERTER-DEFIBRILLATOR	
C1899	COMPINATION (IMPLANTABLE)	\$0.00
C1900	LEAD, LEFT VENTRICULAR CORONARY VENOUS SYSTEM	\$0.00
	CATHETER, GOLD PROBE SINGLE-USE	
C2600	ELECTROHEMOSTATIS CATHETER	\$0.00
C2614	PROBE, PERCUTANEOUS LUMBAR DISCECTOMY	\$0.00
C2615	SEALANT,PULMONARY, LIQUID	\$0.00
C2616	BRACHYTHERAPY SEED, YTTRIUM-90	\$0.00
	STENT, NON-CORONARY, TEMPORARY, WITHOUT	
C2617	DELIVERY SYSTEM	\$0.00
C2618	PROBE, CRYOABLATION	\$0.00
	PACEMAKER, DUALCHAMBER, NON RATE RESPONSIVE	
C2619	(IMPLANTABLE)	\$0.00
	PACEMAKER, SINGLE CHAMBER, NON RATE-	
C2620	RESPONSIVE (IMPLANTABLE)	\$0.00
	PACEMAKER, OTHER THAN SINGLE OR DUAL CHAMBER	
C2621	(IMPLANTABLE)	\$0.00
C2622	PROTHESIS,PENILE NON-INFLATABLE	\$0.00
	STENT, NON-CORONARY, TEMPORARY, WITH DELIVERY	
C2625	SYSTEM	\$0.00
	INFUSION PUMP, NON-PROGRAMMABLE, TEMPORARY	
C2626	(IMPLANTABLE)	\$0.00
C2627	CATHETER, SUPRAPUBIC/CYSTOSCOPIC	\$0.00
C2628	CATHETER, OCCLUSION	\$0.00
	INTRODUCER/SHEATH, OTHER THAN GUIDING,	
C2629	INTRACARDIAC ELECTROPHYSIOLOGICAL, LASER	\$0.00
	CATHETER, ELECTROPHYSIOLOGY,	
	DIAGNOSTIC/ABLATION, OTHER THAN 3D OR VECTOR	.
C2630	MAPPING, COOL TIP	\$0.00
0000	REPAIR DEVICE, URNIARY, INCONTINENCE, WITHOUT	,
C2631	SLING GRAFT	\$0.00
0000	BRACHYTHERAPY SOURCE, HIGH ACTIVITY, IODINE 125,	.
C2634	PER SOURCE	\$0.00
00	BRACHYTHERAPY SOURCE, HIGH ACTIVITY, PALLADIUM	.
C2635	103, PER SOURCE	\$0.00
0000	BRACHYTHERAPY LINEAR SOURCE, PALLADIUM 103, PER	,
C2636	1 MM	\$0.00

Procedure Code	Procedure Code Description	Rate
	BRACHYTHERAPY SOURCE, YTTERBIUM-169, PER	
C2637	SOURCE	\$0.00
	MAGNETIC RESONANCE ANGIOGRAPHY WITH	
C8900	CONTRAST, ABDOMEN	\$0.00
	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT	
C8901	CONTRAST, ABDOMEN	\$0.00
	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT	
C8902	CONTRAST FOLLOWED BY WITH CONTRAST, ABDOMEN	\$0.00
	MAGNETIC RESONANCE IMAGING WITH CONTRAST,	
C8903	BREAST; UNILATERAL	\$0.00
	MAGNETIC RESONANCE IMAGING WITHOUT CONTRAST,	
C8904	BREAST; UNILATERAL	\$0.00
	MAGNETIC RESONANCE IMAGING WITHOUT CONTRAST	
C8905	FOLLOWED BY WITH CONTRAST, BREAST; UNILATERAL	\$0.00
	MAGNETIC RESONANCE IMAGING WITH CONTRAST,	
C8906	BREAST; BILATERAL	\$0.00
_	MAGNETIC RESONANCE IMAGING WITHOUT CONTRAST,	
C8907	BREAST; BILATERAL	\$0.00
_	MAGNETIC RESONANCE IMAGING WITHOUT CONTRAST	
C8908	FOLLOWED BY WITH CONTRAST, BREAST; BILATERAL	\$0.00
_	MAGNETIC RESONANCE ANGIOGRAPHY WITH	
C8909	CONTRAST, CHEST (EXCLUDING MYOCARDIUM)	\$0.00
_	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT	
C8910	CONTRAST, CHEST (EXCLUDING MYOCARDIUM)	\$0.00
	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT	
C8911	CONTRAST FOLLOWED BY THE CONTRAST	\$0.00
	MAGNETIC RESONANCE ANGIOGRAPHY WITH	*
C8912	CONTRAST, LOWER EXTREMITY	\$0.00
00040	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT	40.00
C8913	CONTRAST, LOWER EXTREMITY	\$0.00
	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT	
00044	CONTRAST FOLLOWED BY WITH CONTRAST, LOWER	Φ0.00
C8914	EXTREMITY MACNIFIC DESCRIANCE ANGLOGRAPHY WITH	\$0.00
C0010	MAGNETIC RESONANCE ANGIOGRAPHY WITH	<u></u> ቀላ ላላ
C8918	CONTRAST, PELVIS	\$0.00
C0010	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT	ቀ ለ ለለ
C8919	CONTRAST, PELVIS MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT	\$0.00
Conn	CONTRAST, FOLLOWED BY WITH CONTRAST, PELVIS	<u></u> ቀለ ለለ
C8920	REFILLING AND MAINTENANCE OF PORTABLE OR	\$0.00
	IMPLANTABLE PUMP OR RESERVOIR FOR DRUG	
C8956	DELIVERY FOR THERAPY/DIAGNOSIS	ቀ ለ ለለ
00900	INTRAVENOUS INFUSION FOR THERAPY/DIAGNOSIS;	\$0.00
C8957	INITIATION OF PROLONGED INFUSION	ቀ ስ ስስ
C9113	INTIATION OF PROLONGED INFOSION INJECTION, PANTOPRAZOLE SODIUM, PER VIAL	\$0.00 \$0.00
C9113 C9121	INJECTION, PANTOPRAZOLE SOCIOM, PER VIAL INJECTION, ARGATROBAN, PER 5 MG	\$0.00
C9399	UNCLASSIFIED DRUGS OR BIOLOGICALS	\$0.00
C9399 C9711	H.E.L.P APHERESIS SYSTEM	\$0.00
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Procedure Code	Procedure Code Description	Rate
	CREATIONS OF THERMAL ANAL LESIONS BY	
C9716	RADIOFREQUENCY ENERGY	\$0.00
	ENDOSCOPIC FULL THICKNESS PLICATION IN THE	
	GASTRIC CARDIA USING ENDOSCOPIC PLICATION	
C9724	SYSTEM (EPS); INCLUDES EN	\$0.00
	PLACEMENT OF ENDORECTAL INTRACAVITARY	
C9725	APPLICATOR FOR HIGH INTENSITY BRACHYTHERAPY	\$0.00
	PLACEMENT AND REMOVAL (IF PERFORMED) OF	
C9726	APPLICATOR INTO BREAST FOR RADIATION THERAPY	\$0.00
	INSERTION OF IMPLANTS INTO TJE SOFT PALATE;	
C9727	MINIMUM OF THREE IMPLANTS	\$0.00